

**POOL PERMIT APPLICATION FEE \$50.00**

DATE; \_\_\_\_\_

NAME OF COMPANY OR CORPORATION; \_\_\_\_\_

ADDRESS; \_\_\_\_\_

STATE & ZIP CODE; \_\_\_\_\_

METHOD OF WATER TREATMENT; \_\_\_\_\_

TYPE OF POOL: \_\_\_\_\_  
(Public, Semi-Public, or special Purpose Pool)

ADDRESS POOL IS LOCATED; \_\_\_\_\_

NUMBER OF LIFEGUARDS \_\_\_\_\_

BATHING LOAD NOT TO EXCEED; \_\_\_\_\_ BATHERS

WHO IS YOUR CERTIFIED POOL OPERATOR (105 CMR 435.17)

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE # ; \_\_\_\_\_

(Enclose Copy of Certification)

Any additional information needed to contact Certified Pool Operator during pool operating hours.

HAS THE SAFETY MARKINGS BEEN APPLIED TO YOUR POOL? (105 CMR 435.12)

YES; \_\_\_\_\_

NO \_\_\_\_\_

ENCLOSE COPY OF LETTER OF AGREEMENT OR CONTRACT FOR MONTHLY POOL TESTING BY MA. CERTIFIED LAB.

SIGNATURE \_\_\_\_\_

PHONE # \_\_\_\_\_

\*ANSWER ALL QUESTIONS COMPLETELY

- LICENSE IS GIVEN OUT AFTER POOL IS INSPECTED
- PLEASE BE ADVISED THAT YOU MUST ALLOW A MINIMUM WAITING PERIOD OF 15 DAYS BETWEEN REQUEST AND INSPECTION.